



575 Broad Hollow Road, Melville, NY 11747
TEL: (631) 694-3040 FAX: (631) 420-8436
www.pacelabs.com

Laboratory Results

Results for the samples and analytes requested
The lab is not directly responsible for the integrity of the sample before receipt at the lab and is responsible only for the certified tests

Sample Information:

Type: Drinking Water
Origin: Raw Well
Repeat

Hampton Bays Water District

P.O. Box 1013

Hampton Bays, NY 11946

Attn To : Supt. McCuen

Federal ID : 5103704

Collected : 04/14/2020 08:15 AM Point GAC VESSEL A

Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964001

Client Sample ID.: GAC VESSEL A

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	001 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	001 SP5T1/1

Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range

U - Indicates the compound was analyzed for, but not detected

Result(s) reported meet(s) NYS Regulatory Limit(s).

Result(s) flagged with * Exceed NYS Regulatory Limit(s). Limit Noted.

Date Reported: 04/15/2020

Kimberley Mack

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Sample Information:

Type: Drinking Water

Origin: Raw Well

Repeat

Hampton Bays Water District

P.O. Box 1013

Hampton Bays, NY 11946

Attn To : Supt. McCuen

Federal ID : 5103704

Collected : 04/14/2020 08:16 AM Point GAC VESSEL A

Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964002

Client Sample ID.: GAC VESSEL A

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	002 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	002 SP5T1/1

Qualifiers:

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Result(s) flagged with * Exceed NYS Regulatory Limit(s). Limit Noted.

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Origin: Raw Well

Repeat

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Attn To : Supt. McCuen

Federal ID : 5103704

Collected : 04/14/2020 08:30 AM Point GAC VESSEL A

Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964003

Client Sample ID.: GAC VESSEL A

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	003 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	003 SP5T1/1

Qualifiers:

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Sample Information:

Type: Drinking Water

Origin: Raw Well

Repeat

Hampton Bays Water District

P.O. Box 1013

Hampton Bays, NY 11946

Attn To : Supt. McCuen

Federal ID : 5103704

Collected : 04/14/2020 08:45 AM Point GAC VESSEL A

Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964004

Client Sample ID.: GAC VESSEL A

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	004 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	004 SP5T1/1

Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

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Sample Information:

Type: Drinking Water
Origin: Raw Well
Repeat

Hampton Bays Water District

P.O. Box 1013

Hampton Bays, NY 11946

Attn To : Supt. McCuen

Federal ID : 5103704

Collected : 04/14/2020 09:15 AM Point GAC VESSEL A

Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964005

Client Sample ID.: GAC VESSEL A

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	005 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	005 SP5T1/1

Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

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Sample Information:

Type: Drinking Water
Origin: Raw Well
Repeat

Hampton Bays Water District

P.O. Box 1013

Hampton Bays, NY 11946

Attn To : Supt. McCuen

Federal ID : 5103704

Collected : 04/14/2020 08:15 AM Point GAC VESSEL B

Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964006

Client Sample ID.: GAC VESSEL B

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	006 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	006 SP5T1/1

Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

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J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range

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Result(s) reported meet(s) NYS Regulatory Limit(s).

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Date Reported: 04/15/2020

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Sample Information:

Type: Drinking Water
Origin: Raw Well
Repeat

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Attn To : Supt. McCuen

Federal ID : 5103704

Collected : 04/14/2020 08:16 AM Point GAC VESSEL B

Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964007

Client Sample ID.: GAC VESSEL B

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	007 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	007 SP5T1/1

Qualifiers:

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Origin: Raw Well
Repeat

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Attn To : Supt. McCuen

Federal ID : 5103704

Collected : 04/14/2020 08:30 AM Point GAC VESSEL B

Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964008

Client Sample ID.: GAC VESSEL B

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	008 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	008 SP5T1/1

Qualifiers:

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Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964009

Client Sample ID.: GAC VESSEL B

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	009 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	009 SP5T1/1

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Attn To : Supt. McCuen

Federal ID : 5103704

Collected : 04/14/2020 09:15 AM Point GAC VESSEL B

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Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964010

Client Sample ID.: GAC VESSEL B

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	010 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	010 SP5T1/1

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Type: Drinking Water
Origin: Raw Well
Repeat

Hampton Bays Water District

P.O. Box 1013

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Attn To : Supt. McCuen

Federal ID : 5103704

Collected : 04/14/2020 08:15 AM Point BLEND EFF

Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964011

Client Sample ID.: BLEND EFF

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	011 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	011 SP5T1/1

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Federal ID : 5103704

Collected : 04/14/2020 08:16 AM Point BLEND EFF

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Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964012

Client Sample ID.: BLEND EFF

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	012 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	012 SP5T1/1

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Collected : 04/14/2020 08:30 AM Point BLEND EFF

Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964013

Client Sample ID.: BLEND EFF

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	013 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	013 SP5T1/1

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Origin: Raw Well
Repeat

Hampton Bays Water District

P.O. Box 1013

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Attn To : Supt. McCuen

Federal ID : 5103704

Collected : 04/14/2020 08:45 AM Point BLEND EFF

Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964014

Client Sample ID.: BLEND EFF

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	014 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	014 SP5T1/1

Qualifiers:

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Sample Information:

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Origin: Raw Well

Repeat

Hampton Bays Water District

P.O. Box 1013

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Attn To : Supt. McCuen

Federal ID : 5103704

Collected : 04/14/2020 09:15 AM Point BLEND EFF

Received : 04/14/2020 11:08 AM Location

Collected By CLIENT

Sample Comments:

RUN TO WASTE

Lab No. : 70127964015

Client Sample ID.: BLEND EFF

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 04/14/2020 5:30 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	04/15/2020 11:30	015 SP5T1/1
Total Coliforms	Absent		1		Absent	04/15/2020 11:30	015 SP5T1/1

Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range

U - Indicates the compound was analyzed for, but not detected

Result(s) reported meet(s) NYS Regulatory Limit(s).

Result(s) flagged with * Exceed NYS Regulatory Limit(s). Limit Noted.

Date Reported: 04/15/2020

Kimberley Mack

Test results meet the requirements of NELAC unless otherwise noted.

This report shall not be reproduced except in full, without the written approval of the laboratory.

WorkOrder :

70127964

Laboratory Certifications

Pace Analytical Services Long Island

575 Broad Hollow Rd, Melville, NY 11747

New York Certification #: 10478 Primary Accrediting Body

New Jersey Certification #: NY158

Pennsylvania Certification #: 68-00350

Connecticut Certification #: PH-0435

Maryland Certification #: 208

Rhode Island Certification #: LAO00340

Massachusetts Certification #: M-NY026

New Hampshire Certification #: 2987

W0#: 70127964



70127964

Sample Request Form PUBLIC WATER SUPPLIER

Date: 4-14-20

Collected By: W Booth

Accepted By: [Signature]

Cooler Temp: 5.4 °C 4/14/20 11:08

Client Info: HAMPTON BAYS WATER DISTRICT

P.O. BOX 1013

Address: HAMPTON BAYS, NEW YORK 11946

(631) 728-0179

Phone #:

Attn:

Proj. # or (Name):

Bill To:

Copies To:

☒ WELL OFF LINE 1-1, 1-2, 1-3, B, D, E

B, E, Vess A, Vess B

☒ WELL RUN TO SYSTEM 5-1

☐ YES ☐ NO VOC'S PRESERVED WITH HCI

Sample Types
PW - Potable Water
GW - Groundwater
SW - Surface Water
WW - Waste Water
AQ - Aqueous
S - Soil

Purpose
RO - Routine
RE - Resample
S - Special

Origin
D - Distribution
RW - Raw Well
TW - Treated Well
T - Tank
MW - Monitoring Well
I - Influent
E - Effluent

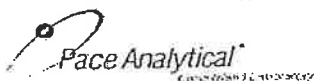
Treatment Types
AST - Air Stripper
GAC - Granular Activated Charcoal
N - Nitrate Removal Plant
FE - Iron Removal Plant
O - Other

Sample Info:

Date/Time Collected:	Sample Type	Location	Origin	Treatment Type	Purpose	Field Readings Cl ₂ pH/Temp	Analysis	Lab No.
4-14-20 7:50	GW	WELL 1-1	RW	-	RE		BACT	001-ED
4-14-20 7:52	GW	WELL 1-2	RW	-	RE		BACT	002-ED
4-14-20 7:48	GW	WELL 1-3	RW	-	RE		BACT	003-ED
4-14-20 8:03	GW	BLEND INF.	RW	-	RE		BACT	004-ED
4-14-20 8:15	GW	GAC Vessel A	RW	-	RE	8:15, 8:14, 8:30 8:45, 9:15	BACT - 5/u, 1min, 15min, 30min, 1HR	005-ED
4-14-20 8:15	GW	GAC Vessel B	RW	-	RE	8:15, 8:14, 8:30 8:45, 9:15	BACT - 5/u, 1min, 15min, 30min, 1HR	006-ED
4-14-20 8:15	GW	BLEND EFF	RW	-	RE	8:15, 8:14, 8:30 8:45, 9:15	BACT - 5/u, 1min, 15min, 30min, 1HR	007-ED
4-14-20 9:55	GW	WELL 5-1	RW	-	S		IRON, MANG	008-ED

Remarks:

Well 1-1, Well 1-2, Well 1-3, BLEND INF, BLEND EFF, Vess A, Vess B & ALL WENT TO BLOW OFF.



Sample Condition Upon Receipt

Client Name:

HBW

Pr

WO#: 70127964

PM: KMM

CLIENT: HBW

Due Date: 05/14/20

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☒ Client ☐ Commercial ☐ Pace ☐ Other

Tracking #:

Custody Seal on Cooler/Box Present: ☐ Yes ☒ No Seals intact: ☐ Yes ☒ No

Packing Material: ☐ Bubble Wrap ☐ Bubble Bags ☒ Ziploc ☐ None ☐ Other

Thermometer Used: TH091

Correction Factor: +0.2

Cooler Temperature (°C): 5.1

Cooler Temperature Corrected (°C): 5.6

Temperature Blank Present: ☐ Yes ☒ No

Type of Ice: ☒ Wet ☐ Blue ☐ None

☐ Samples on ice, cooling process has begun

Date/Time 5035A kits placed in freezer

Temp should be above freezing to 6.0°C

USDA Regulated Soil (☐ N/A, water sample)

Date and Initials of person examining contents: 4/14/20 CD

Did samples originate in a quarantine zone within the United States: AL, AR, CA, FL, GA, ID, LA, MS, NC, NM, NY, OK, OR, SC, TN, TX, or VA (check map)? ☐ YES ☒ NO

Did samples originate from a foreign source (internationally, including Hawaii and Puerto Rico)? ☐ Yes ☒ No

If Yes to either question, fill out a Regulated Soil Checklist (F-LI-C-010) and include with SCUR/COC paperwork.

			COMMENTS:
Chain of Custody Present:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	1.
Chain of Custody Filled Out:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2.
Chain of Custody Relinquished:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	3.
Sampler Name & Signature on COC:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A	4.
Samples Arrived within Hold Time:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	5.
Short Hold Time Analysis (<72hr):	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	6.
Rush Turn Around Time Requested:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	7.
Sufficient Volume: (Triple volume provided for MS/MSD)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	8.
Correct Containers Used:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	9.
-Pace Containers Used:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Containers Intact:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	10.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11. Note if sediment is visible in the dissolved container.
Sample Labels match COC:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	12.
-Includes date/time/ID/Analysis Matrix SL <input checked="" type="checkbox"/> OIL			
All containers needing preservation have been checked	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13. <input type="checkbox"/> HNO ₃ <input type="checkbox"/> H ₂ SO ₄ <input type="checkbox"/> NaOH <input type="checkbox"/> HCl
pH paper Lot #			Sample #
All containers needing preservation are found to be in compliance with EPA recommendation? (HNO ₃ , H ₂ SO ₄ , HCl, NaOH>9 Sultide, NAOH>12 Cyanide)	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Exceptions: VOA, Coliform, TOC/DOC, Oil and Grease, DRO/8015 (water). Per Method, VOA pH is checked after analysis			
Samples checked for dechlorination:	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14. Positive for Res. Chlorine? Y N
KI starch test strips Lot #			
Residual chlorine strips Lot #			
Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Trip Blank Present:	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	16.
Trip Blank Custody Seals Present	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if applicable):			

Client Notification/ Resolution:

Field Data Required?

Y / N

Person Contacted:

Date/Time:

Comments/ Resolution:

* PM (Project Manager) review is documented electronically in LIMS.

F-LI-C-002-rev.02